

# RtI CONTINUUMS

## CURRICULUM ~ INSTRUCTION ~ ASSESSMENT ~ BEHAVIOR

One	Two	Three	Four	Five
<i>From a focus on teaching textbooks to a focus on student learning.</i>				
Curriculum is driven primarily by teacher preference and not aligned to the state/local standards.	Curriculum is driven primarily by textbooks.	Curriculum is aligned vertically and horizontally to state/local standards. Teachers embed evidence-based teaching practices in a multi-level system of support within the integrated general education and special education curriculum.	Curriculum is vertically and horizontally aligned with state/local standards. Evidence-based quality instruction is adjusted according to students' needs and their responses to instruction and interventions.	The aligned curriculum is implemented in every classroom and leads to a continuum of teaching and learning, allowing all students to meet and exceed state/local standards, and for teachers to help students prevent failure.
<i>From just teaching to teaching with impact.</i>				
Teaching occurs in isolation, without consideration to adjusting instruction to meet the needs of all students.  All students are expected to learn in the same way.  Many students with Individualized Education Programs (IEPs) are removed from the general education setting for specialized instruction.	Students with IEPs are included in the general education setting where special educators may assist with implementation of accommodations.  Some students with IEPs, who need additional instruction, learn in special education classrooms.	Staffs agree on and are committed to a shared vision regarding curriculum, instruction, and assessments across and between grade levels.  Multi-level systems of support and prevention are embedded within the general education curriculum and setting.  Most students with IEPs fully participate in the general education setting.	General educators and special educators develop a common understanding in reference to instruction and assessment responsibilities within collaborative structures that include a well defined multi-level system of teaching and learning.	Evidence-based teaching practices and learning strategies are implemented with integrity and fidelity to meet the needs of all students.  Implementation of interventions is continually monitored and evaluated to ensure fidelity and integrity.

## RESPONSE TO INTERVENTION (RtI)

Note: From *Response to Intervention (RtI) and Continuous School Improvement (CSI): Using Data, Vision, and Leadership to Design, Implement, and Evaluate a Schoolwide Prevention System*, by Victoria L. Bernhardt and Connie L. Hébert, 2011, Larchmont, NY: Eye On Education.

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One	Two	Three	Four	Five
<i>From assessment of learning to assessment for learning.</i>				
Assessments are given at the end of units or when the teacher feels so inclined.	Assessments, usually aligned to textbooks, may include informal as well as formal approaches. Some results are used by some staff to inform and design instruction.	Common formative assessments, aligned to the standards, are used to monitor student learning in every subject area, and to adjust and improve instruction so all students can become proficient.	Common formative assessments inform curricular and standards alignment. Common formative assessments are used with ongoing progress monitoring to assign students to intervention groups and ensure each student's success.	All student outcome data are openly discussed and analyzed. These data are used to make instructional decisions. Students who receive additional instructional support receive ongoing monitoring of progress using curriculum-based measures.
<i>From responding to behavior to developing behavioral competence.</i>				
Behavioral issues are addressed via office referrals. There is no differentiation of disciplinary action or intervention.	Some teachers have proactive approaches to discipline. Behavioral interventions are sometimes used in addition to, or in place of, traditional disciplinary action. Most behavior issues are referred to the office.	Behavioral issues are viewed primarily as instructional issues. Staffs agree on how behavior should be handled within a multi-level preventive system. Severe incidents are dealt with by the office.	The multi-level prevention system includes targeted, evidence-based behavioral interventions. Expectations and strategies are taught consistently for students to improve their own behavior to support learning.	Social and behavioral expectations are clearly defined, agreed upon, monitored, and enforced. Students demonstrate social and behavioral competence. Behavior issues do not exist, only instructional concerns.

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## COLLABORATION

One	Two	Three	Four	Five
<i>From teaching in isolation to learning communities.</i>				
Teaching occurs in isolation. ‘Yours’ and “mine” mentality exists regarding students identified with special needs. Learning problems are based on opinion rather than data.	Teachers independently engage in problem solving to design interventions for at-risk students. General educators and special educators may share information regarding accommodations for students either as they are being considered for evaluation or based on expectations outlined in IEPs.	Staffs are committed to a shared vision that includes collaborative structures to implement the vision. Collaboration includes structures such as formal teams, peer coaching, protected meeting and planning times.	All teachers collaborate to implement an RtI system that includes universal screenings and common formative assessments across all subject areas including behavioral/social expectations. Collaborative decision making occurs for student assignment to intervention levels as well as for adjustments to curriculum and instruction. Collaborative structures, implemented with integrity and fidelity, allow teachers to support each other for increased student achievement and attainment of the shared vision.	All staffs are engaged in collaborative structures to ensure and maintain student success. Collaborative structures are utilized to implement a continuum of learning for all students. No student falls through the cracks. The RtI system ensures student success and identifies needed adjustments to address the unique characteristics of the learners.
<i>From separate practices and environments to a collaborative system.</i>				
General educators attend IEP meetings because they are required to, but are not sure how to contribute. Special educators are unclear how to include general educators in the IEP process.	Special educators may assist general educators with implementation of pre-referral strategies for students who struggle, but these are often not documented until a referral is made. When students are identified, general educators are involved in the IEP based on knowledge of the general curriculum and need for identifying accommodations.	Roles and responsibilities are defined for special education and general education and both are committed to the implementation of the shared vision. General educators participate fully in the special education process: from referral, evaluation, and eligibility determination, to IEP development, implementation, progress monitoring, annual review, and re-evaluation.	General and special education teachers agree upon and share instructional and assessment responsibilities through protected, job embedded collaborative time. Coaching and feedback support integrity and fidelity of implementation. Staffs collaborate, using common formative assessment data, to determine intervention level based on established entry and exit criteria of a multi-level prevention system.	Responsibility for steps in the special education process is blended among general and special education personnel. The process is intertwined in the RtI system, creating reliance on documentation from instructional data to help all students learn.

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## REFERRAL PROCEDURES

One	Two	Three	Four	Five
<i>From learning disabilities to learning differences.</i>				
Students exhibiting learning and/or behavior problems are promptly referred to special education for evaluation. Referrals from parents most often lead to evaluation without additional consideration.	Classroom interventions or pre-referral strategies may occur before referral for consideration of special education evaluation; however, referrals from parents usually lead to immediate evaluation.	Teachers strive to identify at-risk students for early prevention and pre-referral strategies. Pre-referral teams monitor interventions prior to referral for consideration of special services. Referrals from parents are reviewed and may be redirected to the multi-level RtI system.	Referrals made outside of the RtI system, including referrals from parents, are directed to the appropriate team for documentation of interventions. Clear and helpful documentation procedures exist to determine intervention effectiveness. This information is used for special education referral and eligibility determinations.	Progress monitoring consistently informs staff of students' needs and their responses to interventions. From this information, teachers determine if interventions should continue or if students need to be referred for consideration of evaluation for special education services. Students with disabilities are not seen as qualitatively different from non-disabled students.
<i>From compliance to best practices.</i>				
Learner characteristics associated with poverty, limited English proficiency, and learning styles are mistaken for learning disabilities, resulting in a high number of students referred for special education evaluation, while the percent determined eligible is often low because no significant discrepancy exists. Referrals for special education are reviewed by administrators for processing.	Referrals are processed by the appropriate team of professionals who determine if an evaluation is needed. Pre-referral teams may assist with interventions, but there is no multi-level system of prevention for monitoring implementation and student responsiveness. The ratio of students referred for evaluation and those found eligible improves as some referrals are addressed through pre-referral strategies. The time it takes to refer a student is unnecessarily extended.	Staff discusses and uses common formative assessment data (screening, benchmark, and progress monitoring) informally to determine appropriate intervention level and referral for consideration of special education evaluation. Referrals for special education are processed by the appropriate team of professionals, and pre-referral data are considered in determining need for evaluation. RtI data are used to assist in determination of eligibility for specific learning disability or other disabilities because consistent procedures are in place.	Assignment to appropriate levels of intervention results in decreased referrals for special services. Accurate referrals for special education evaluation are made, evidenced by marginal differences in the number of referrals for consideration of evaluation, the number of students evaluated, and the number of students found eligible. Referrals made through the RtI system are increasingly accurate and accepted due to intervention integrity, fidelity, and effectiveness, as well as sufficient documentation.	RtI system is fluid between and among special and general education environments, students, and staff. Components of an RtI system, such as multi-level instruction and intervention, instructional coherence, ongoing formative assessments, including progress monitoring, and collaboration for informed decision making are embedded in daily practices and processes and have become “the way we do business.”

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## DATA ANALYSIS AND USE

One	Two	Three	Four	Five
			<b><i>From limited data collection to comprehensive schoolwide data utilization.</i></b>	
Data or information about student performance and student learning needs are not collected in any systematic way.	Some teachers collect some student learning data, other than grades and state testing results. There is no specifically appointed time, designated personnel, or responsibilities for data collection and review.	Expectations regarding data collection and analysis are communicated to all staff. Student feedback, acquired through perceptions data, classroom performance, analysis of behavior, and achievement data are used to determine support strategies and interventions.	All elements of the school organization are improved on the basis of comprehensive data analyses including: analysis of contributing causes of undesirable results and analysis of process effectiveness. Roles and responsibilities include data collection, analysis, and use.	Data and information gathered, analyzed, utilized, and shared with stakeholders are accurate and comprehensive, reflecting all programs and processes in the school. Time and personnel are designated and protected for continually monitoring schoolwide data.
<b><i>From reactive problem solving to proactive decision making.</i></b>				Data inform decisions and include multiple measures to ensure all aspects of the school organization are improved to support teachers' efforts and students' success. Information is analyzed and used to assist with identification and implementation of strategies matched to student need, to prevent student failure, to predict student success, and to address system congruence.

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## PROFESSIONAL LEARNING

One	Two	Three	Four	Five
<i>From professional development events to professional learning experiences.</i>				
Professional development for general and special educators is held separately as the same topics are not perceived as relevant to both groups. Outcomes for professional development are not measured.	Teachers seek professional development, including book studies, for personal professional growth or topics that apply to their students or school. Professional development is evaluated by assessing participants' views of presenter's knowledge, skills, and relevance of content to them.	Professional development includes statewide professional learning, shared learning experiences, shared readings, and peer coaching and feedback structures to support integrity and fidelity of implementation strategies. Professional development and learning is monitored and evaluated for implementation, and includes content related to implementing the schoolwide vision and its multi-level prevention system.	Professional learning includes job-embedded structures, allowing teachers to have ongoing conversations about student learning data and to acquire training to teach students based on the demographic and learning profile of the school. Professional learning is linked with the shared vision, comprehensive data analysis, and contributing cause analyses. Professional learning is evaluated to determine follow-through and to inform future needs.	Effective job-embedded professional learning, based on the evaluation of staff and student needs, leads to the achievement of student learning standards, and helps all staff implement the vision and RtI system. Varied and targeted collaborative professional learning opportunities exist. The professional learning strategies focus on implementing strategies that lead to increased student achievement at each instructional and intervention level.
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## LEADERSHIP

	One	Two	Three	Four	Five
<i>From management to leadership.</i>					
Decisions are reactive to requirements with little knowledge of continuous improvement.	Administrators are supportive of efforts to improve, such as teaming and collaboration. Staff discussions guide decision-making; however, improvement efforts are focused on solving individual problems. Data are analyzed by the administrator; results are shared with teachers, and directives are given for improvement.	All staff, including administration, engage in professional learning. Leadership teams are established to inform decisions and to implement the vision. Roles and responsibilities of all staff members and leadership teams are identified. The shared vision and expectations are implemented by all.	Leadership participates in proactive, data informed, and preventive decision making. Administration and teaching staff are informed regarding evidence-based practices and share professional learning experiences. Time and resources are allocated and protected for instruction, collaboration, planning, and interventions, which are implemented with integrity and fidelity.	The vision is vigorously supported and implemented with consistent communication regarding implementation expectations and outcomes. Leadership protects and honors allocated time and resources for collaboration, professional learning, and interventions. Comprehensive data analysis informs decisions and allows leadership to accurately predict the professional needs of colleagues for continuous improvement and the achievement of student learning standards.	
Responsibilities for scheduling professional development, curriculum selection or development, and other decisions are made by administration.					

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